DEPARTMENT OF HEALTH SERVICES COUNTY OF LOS ANGELES

SUBJECT:

AUTHORIZATION FOR PARAMEDIC

PROVIDER STATUS

REFERENCE NO. 406

PURPOSE:

To outline the criteria to be approved as a paramedic provider in Los Angeles

County.

AUTHORITY: Health & Safety Code, Division 2.5, Sections 1797.52, 1797.94, 1797.178,

1797.180, 1797.201

California Code of Regulations, Title 22, Sections 100166, 100167, 100169,

100400 and 100402

PRINCIPLE:

Providers applying for paramedic provider status must complete the application process 1. in its entirety, including written approval from the EMS Agency prior to commencing operations.

POLICY:

- ١. Eligibility Requirements
 - In order to apply for paramedic provider status, a fire department must be Α. authorized by the governing body of the jurisdiction to provide 9-1-1 emergency services.
 - A private ambulance company must be licensed by the County of Los Angeles as В. a basic life support (BLS) provider for a minimum of twenty-four months during which time said license has been maintained without violations of any applicable provisions, standards, or requirements of state statute or regulation, or of the Los Angeles County Code or local policies and procedures. Each of the company's ambulance vehicles that operate within the County of Los Angeles shall also be licensed by the County.

11. **Application Process**

- The applicant shall submit a written request for approval of paramedic provider Α. status to the Director of the Los Angeles County EMS Agency. The request shall include the following:
 - 1. The desired implementation date.
 - The number of advanced life support (ALS) units desired and the 2. proposed location for each unit.
 - The preferred base hospital assignment, subject to EMS Agency 3. approval.

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SUPERSEDES: 3-15-11

APPROVED:

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- 4. Other information pertinent to the proposed paramedic program (e.g., number of personnel licensed and accredited as paramedics, the number of personnel requiring paramedic training, and the name and contact information for the EMS educator, paramedic coordinator and nurse educator, (if applicable).
- The name and contact information for the Provider Agency Medical
 Director, or Drug Authorizing Physician, under whose license the provider
 agency will procure equipment, pharmaceuticals (both scheduled and
 non-scheduled) and medical devices.

B. Provider Agency Responsibilities

- 1. Provide emergency medical service response on a continuous 24-hour per day basis unless otherwise approved by the EMS Agency. Approved ALS providers may submit a written request, including justification, to the EMS Agency for consideration to waive the 24-hours/day requirement. Waivers will be granted on a case-by-case basis.
- 2. Submit the following documents to the EMS Agency:
 - a. Quality Improvement (QI) Plan
 - b. Description of the communications equipment that will be used
 - c. A controlled substance policy that outlines how scheduled pharmaceuticals will be procured, stored, secured, and distributed. The policy shall include the procedures for handling any lost, broken or tampered scheduled pharmaceuticals.
 - d. A supply/resupply policy outlining the method for purchasing and storing non-scheduled pharmaceuticals and medical devices.
 - e. A plan ensuring that all personnel involved in the ALS program are oriented to the base hospital's operation.
 - f. A policy/procedure to ensure that all ALS units and paramedic personnel are visibly identified as such.
 - g. A list of all the ALS, Assessment and Reserve units, numerical unit designation, physical address and contact number for the location of each unit.

NOTE: The above information needed for approval is due to the EMS Agency as a <u>complete</u> packet within 30 (thirty) days of receipt of letter and application packet from the EMS Agency acknowledging the request for approval. If a complete application packet not received within that 30 (thirty) day period the request is denied, a subsequent request for approval will not be accepted for 90 (ninety) days.

- 3. Utilize and maintain communications as specified by the EMS Agency.
- 4. Arrange for a base hospital orientation. (This may be facilitated in conjunction with the EMS Agency).

- 5. Procure and maintain equipment, supplies and pharmaceuticals for each ALS, Assessment and Reserve unit(s) as outlined in the applicable policies. Each ALS, Assessment and Reserve unit shall undergo a unit inventory inspection and be approved by the EMS Agency prior to deployment.
- 6. Ensure that all deployed unit(s) (ALS, Assessment and Reserve) are fully stocked at all times.
- 7. Private providers shall maintain a written agreement with the Los Angeles County EMS Agency to participate in the ALS program. This agreement shall be reviewed every two years and may be changed, renewed, canceled or otherwise modified as necessary.
- 8. Appoint a Paramedic Coordinator to act as the liaison with the EMS Agency and the assigned base hospital.
- 9. Ensure that the paramedic coordinator attends EMS Orientation within six (6) months of being appointed. (EMS Orientation dates are prescheduled and held on a quarterly basis).
- Staff each approved ALS unit with a minimum of two licensed and locally accredited paramedics in accordance with Ref. No. 408, Advanced Life Support Unit Staffing.
- 11. A public provider will only be considered for approval for the assessment unit configuration if a paramedic program consisting of a two-paramedic ALS unit response configuration is in place. The provider shall comply with Reference No. 416, Assessment Unit.

C. EMS Agency Responsibilities:

- 1. Acknowledge the applicant's request in writing and furnish a generic copy of the applicable EMT-Paramedic Service Provider Agreement or Medical Control Agreement. A finalized agreement will be mailed under separate cover for execution. A fully executed agreement must be in place prior to program implementation.
- 2. Approve or reject the request for paramedic provider status approval based on the EMS Agency's review of the documents submitted by the applicant as outlined in "Provider Agency Responsibilities".
- 3. Coordinate initial EMS Patient Care Record (PCR) training with the paramedic coordinator or their designee.
- Periodically perform surveys and reviews, including field observation, to ensure compliance with state law and regulations, local policies, and if applicable, the EMT-Paramedic Service Provider Agreement.

- 5. Deny, suspend, or revoke the approval of a paramedic provider for failure to comply with applicable policies, procedures and regulations.
- 6. Conduct ALS, Assessment and Reserve unit inventory inspections prior to approving ALS, Assessment and Reserve units for deployment.

III. Program Updates/Modifications

- A. Provider agencies may request to place additional ALS, Assessment and Reserve units into service and shall notify the EMS Agency for inventory inspection and approval. Requests and inventory inspections shall be done prior to deployment.
- B. Provider agencies shall notify the EMS Agency for any long-term relocation of existing ALS units or reduction in the number of ALS units.
- C. Private provider agencies that have been operational as an ALS provider for at least one year may request approval from the EMS Agency to implement the 1:1 staffing configuration (one EMT/one paramedic) for interfacility transports. In order to be considered for the 1:1 staffing configuration, the provider agency must successfully complete a sixmonth probationary period for their ALS program and pass an ALS site review conducted by the EMS Agency. The 1:1 staffing configuration is contingent on meeting all the specific program requirements and EMS Agency approval.
- D. Provider agencies desiring to change unit configurations shall notify the EMS Agency for inventory inspection and approval.

CROSS REFERENCES:

Prehospital Care Manual:

Ref. No. 214,	Base Hospital and Provider Agency Reporting Responsibilities
Ref. No. 408,	Advanced Life Support (ALS) Unit Staffing
Ref. No. 409,	Reporting ALS Unit Staffing Exceptions
Ref. No. 411,	Provider Agency Medical Director
Ref. No. 620,	EMS Quality Improvement Program
Ref. No. 701,	Supply and Resupply of Designated EMS Provider Units/Vehicles
Ref. No. 702,	Controlled Drugs Carried on ALS Units
Ref. No. 703,	ALS Unit Inventory
Ref. No. 704,	Assessment Unit Inventory
Ref. No. 710,	Basic Life Support Ambulance Equipment
Ref. No. 716,	Paramedic Communications System
Ref. No. 803,	Los Angeles County Paramedic Scope of Practice

Los Angeles County Code, Title 7. Business Licenses, Chapter 7.16, Ambulances